

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	50	7536	6/8/00
O.I.P.E. CLASSIFIER		19	6/14/00
FORMALITY REVIEW	NH	617	7-28-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	11-8-11
Original	13-23-26
1	W W
2	W W
3	W W
4	W W
5	W W
6	W W
7	W W
8	W W
9	W W
10	✓ -
11	✓ ✓
12	✓ ✓
13	W W
14	✓ =
15	✓ ✓
16	✓ ✓
17	=
18	=
19	=
20	✓
21	✓
22	✓
23	✓
24	✓
25	✓
26	✓
27	✓
28	✓
29	✓
30	✓
31	
32	✓
33	✓
34	✓
35	=
36	W
37	W
38	W
39	W
40	✓
41	=
42	W
43	W
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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